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DUANS MORRIS LLP ONE MARKET, SPEAR TOWER, SUITE 2000 SAN FRANCISCO, CA 94105-1104 PHONE: 415.371.2200 FAX: 415.371.2201

FACSIMILE TRANSMITTAL SHEET

To:

Examiner John A. Jeffery - Group Art Unit 3742

FIRM/COMPANY:

Mail Stop Amendment / USPTO

FACSIMILE NUMBER:

703.872.9306

CONFIRMATION

TELEPHONE:

703.306.4601

FROM:

Anne Marie Leavy for Edward J. Lynch

DIRECT DIAL:

415.371.2217

DATE:

January 10, 2005

USER NUMBER:

5121

FILE NUMBER:

Atty Docket No. R0367-01003, USSN 10/170,448

TOTAL # OF PAGES: (INCLUDING COVERSHEET)

MESSAGE:

Attached is an Amendment in Response to Office Action Mailed

09/20/2004 and Terminal Declaimer (by Attorney).

NOTE: Original will not follow

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
In re the application of Burbank et al.) Examiner: J. A. Jeffery PECEIVED
For: IMAGEABLE BIOPSY SITE MARKER) Group Art Unit: 3742 CENTRAL FAX CENTER
Serial No.: 10/179,448) JAN 1 0 2005
Filed: November 21, 2003 TRANSMITTAL
Atty. Docket No.: R0367-01003
CERTIFICATE OF MARENG/FACSIMILE PURSUANT TO 37 C.F.R. §1.8 I hereby certify that this these papers are being sort by facsiquile to (/03) Pil-9306, addressed to Examiner J. A. Jeffery, at Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22813-1450, on January 10, 2005, in San Francisco, CA. Anne Marie Leavy
Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
Dear Sir:
1. Transmitted herewith for filing in the above-identified patent application is an <u>Amendment</u> and Response to Office Action Mailed 09/20/2004 and Terminal Disclaimer by Attorney.
2. Claim Fee Calculation No additional claim fee is required. Amendment increases number of claims or multiple dependencies. Additional Claim Fee Calculation Pescription Independent Claims 2201 5-4= 1 x \$100= \$100
Total Claims 2202 $46-31 = 15 \text{ x}$ \$25= \$375.
Fees Due\$475 3. Additional fees: Terminal Disclaimer fee under 37 CFR 1.20(d)\$65
 Additional fees: Terminal Disclaimer fee under 37 CFR 1.20(d)
2004 to January 20, 2005 pursuant to 37 CFR §1.17(a)(1), (Fee Code 2251)\$60
Total Fees Due \$600
5. Payment of Fees Enclosed is a check for the total fees due in the amount of The Commissioner is authorized to charge any additional fees and to credit any overpayment of fees which may be required under 37 C.F.R. §1.16 or §1.17, to Deposit Account No 04-1679, referencing Atty. Docket No. R0367-01003. A duplicate copy of this document is enclosed.
By: Clarant
Duane Morris LLP Edward J. Lynch Registration No. 24,422
One Market
Spear Tower, Suite 2000 San Francisco, CA 94105
Direct Dial: (415) 371-2267 Facsimile: (415) 371-2201

PATENT

IN	THE UNITED STAT	res patei	NT AND TR	ADEMA	RK OFFI	CE	
In re the application of Burbank et al.				Examiner: J. A. Jeffery			
For: IMAG	EABLE BIOPSY SIT	R)	Group Art Unit: 3742				
Serial No.: 10)/17 9,44 8		ý	•			
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Atty. Docket 1	No.: R0367-01003		0.3			-	
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P.O. Box 1450	A 22313-1450						
Dear Sir:	A 22313-1430		OPV				
	tted herewith for filing	∨ ويروم ahoyo	JPV	tant anni	lication is	n Amendment	
1. Transmi	ponse to Office Action	m tile above Mailed 09/2	0/201)4 and T	erminal l	Disclaimer	by Attorney.	
	ee Calculation	,					
	No additional claim fe						
<u>_X_</u>	Amendment increases						
	Description		Claim Fee Ca			Lee	
	Independent Claims	2201	5-4=	1 x	\$100=	\$100	
	Total Claims	2202	46-31=	15 x	\$25=	\$375	
		•		Fees Du	10	\$475	
Addition	nal fees: Terminal Disc	<u>laimer fee u</u>	nder 37 CFR	<u>1.20(d)</u> .		\$65	
	nal fees: <u>Request for E</u> January 20, 2005 pursu						
				Total F	ees Due	\$600	
5. Payment	t of Fees Enclosed is a check for The Commissioner is overpayment of fees to Deposit Account No A duplicate copy of the	authorized which may be 04-1679,	to charge any be required un referencing	r addition nder 37 Atty. Do	nal fees ar C.F.R. §1.	.16 or §1.17, to	
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•		By: <u>(</u>	Edward J.	Lynch			
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